| SCHEDULE E)                                                                                                                                                                                                     | PAGE 1 OF 5<br>FOR SE OF FORM 24/48                      |  |  |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|--|--|--|
| NAME OF COMMITTE (In Full)                                                                                                                                                                                      | FEC IDENTIFICATION NUMBER ▼                              |  |  |  |
| CREDO SUPERPAC                                                                                                                                                                                                  | C C00507517                                              |  |  |  |
|                                                                                                                                                                                                                 | 0 00001011                                               |  |  |  |
| Check If 24-hour report  48-hour report  New report  Amends report f                                                                                                                                            | illed on 10 15 2012                                      |  |  |  |
| Full Name (Last, First, Middle Initial) of Payee                                                                                                                                                                | Date                                                     |  |  |  |
| Alliance Graphics                                                                                                                                                                                               | M M / D D / Y Y Y                                        |  |  |  |
| Mailing Address 1101 8th Street, Suite 100                                                                                                                                                                      | 10 15 2012                                               |  |  |  |
| 3 3 3 4 4 5 1101 oth Street, Suite 100                                                                                                                                                                          | Amount                                                   |  |  |  |
| City State Zip Code                                                                                                                                                                                             |                                                          |  |  |  |
| Berkeley CA 94710                                                                                                                                                                                               | 544.22                                                   |  |  |  |
| Purpose of Expenditure Category/                                                                                                                                                                                | Transaction ID : SE.8866  Office Sought: House State: PA |  |  |  |
| Printing Category/ Printing Type                                                                                                                                                                                | Senate District: 08                                      |  |  |  |
| Name of Federal Candidate Supported or Opposed by Expenditure:                                                                                                                                                  | President                                                |  |  |  |
|                                                                                                                                                                                                                 | Check One: Support X Oppose                              |  |  |  |
|                                                                                                                                                                                                                 | Dishuraamant Fari Drimani VI Canaval                     |  |  |  |
| Calefidal Teal-To-Date Fel Election                                                                                                                                                                             | Disbursement For: Primary General                        |  |  |  |
| for Office Sought                                                                                                                                                                                               | Other (specify)                                          |  |  |  |
| Full Name (Last, First, Middle Initial) of Payee Credo Mobile                                                                                                                                                   | Date                                                     |  |  |  |
| Credo Mobile                                                                                                                                                                                                    | 10 04 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y              |  |  |  |
| Mailing Address 101 Market Street                                                                                                                                                                               | 10 04 2012                                               |  |  |  |
| Suite 700                                                                                                                                                                                                       | Amount                                                   |  |  |  |
| City State Zip Code                                                                                                                                                                                             | 1337.77                                                  |  |  |  |
| San Francisco CA 94105                                                                                                                                                                                          | Transaction ID : SE.8859                                 |  |  |  |
| Purpose of Expenditure Phones Category/                                                                                                                                                                         | Office Sought: House State: PA                           |  |  |  |
| Type                                                                                                                                                                                                            | Senate District: 08                                      |  |  |  |
| Name of Federal Candidate Supported or Opposed by Expenditure:                                                                                                                                                  | President ———                                            |  |  |  |
| MICHAEL G. FITZPATRICK                                                                                                                                                                                          | Check One: Support Oppose                                |  |  |  |
|                                                                                                                                                                                                                 | Disbursement For: Primary X General                      |  |  |  |
| for Office Sought 25080.11                                                                                                                                                                                      | O12 Other (specify)                                      |  |  |  |
|                                                                                                                                                                                                                 |                                                          |  |  |  |
| (a) CURTOTAL of lawrined Index and art Fun and its use                                                                                                                                                          | 4004.00                                                  |  |  |  |
| (a) SUBTOTAL of Itemized Independent Expenditures                                                                                                                                                               | 1881.99                                                  |  |  |  |
| (b) CURTOTAL of Unitersized Independent Europelituus                                                                                                                                                            |                                                          |  |  |  |
| (b) SUBTOTAL of Unitemized Independent Expenditures                                                                                                                                                             | 7 7 7                                                    |  |  |  |
| (a) TOTAL Independent Expanditures                                                                                                                                                                              |                                                          |  |  |  |
| (c) TOTAL Independent Expenditures                                                                                                                                                                              |                                                          |  |  |  |
|                                                                                                                                                                                                                 |                                                          |  |  |  |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert                                                                     |                                                          |  |  |  |
| with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. |                                                          |  |  |  |
| party serimines, any pointed party committee of no agont.                                                                                                                                                       |                                                          |  |  |  |
| Becky Bond                                                                                                                                                                                                      | M = M / D = D / Y = Y = Y                                |  |  |  |
| [Electronically Filed] Date Signature                                                                                                                                                                           | 10 16 2012                                               |  |  |  |
| organizatio -                                                                                                                                                                                                   |                                                          |  |  |  |

| SCHEDULE E)                                                                                                                                                                                                                                                                                                                                                 | PAGE 2 OF 5 FOR SE OF FORM 24/48                        |  |  |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|--|--|--|
| NAME OF COMMITTE (In Full)                                                                                                                                                                                                                                                                                                                                  | FEC IDENTIFICATION NUMBER ▼                             |  |  |  |
| CREDO SUPERPAC                                                                                                                                                                                                                                                                                                                                              | C C00507517                                             |  |  |  |
| Check If 24-hour report X 48-hour report New report X Amends report                                                                                                                                                                                                                                                                                         | t filed on 10 15 2012                                   |  |  |  |
| Full Name (Last, First, Middle Initial) of Payee  Michael Eagle                                                                                                                                                                                                                                                                                             | Date                                                    |  |  |  |
| Mailing Address 22 Clover Lane                                                                                                                                                                                                                                                                                                                              | 10 10 2012  Amount                                      |  |  |  |
| City State Zip Code Wayne PA 19087                                                                                                                                                                                                                                                                                                                          | 1593.75                                                 |  |  |  |
| Purpose of Expenditure Payroll  Category/ Type                                                                                                                                                                                                                                                                                                              | Office Sought: House State: PA Senate District: 08      |  |  |  |
| Name of Federal Candidate Supported or Opposed by Expenditure: MICHAEL G. FITZPATRICK                                                                                                                                                                                                                                                                       | Check One: President Oppose                             |  |  |  |
| Calendar Year-To-Date Per Election for Office Sought                                                                                                                                                                                                                                                                                                        | Disbursement For: Primary General  2012 Other (specify) |  |  |  |
| Full Name (Last, First, Middle Initial) of Payee Impact Dialing                                                                                                                                                                                                                                                                                             | Date 10 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y        |  |  |  |
| Mailing Address 3543 19th Street                                                                                                                                                                                                                                                                                                                            | Amount                                                  |  |  |  |
| City State Zip Code<br>San Fracisco CA 94110                                                                                                                                                                                                                                                                                                                | 500.00<br>Transaction ID : SE.8860                      |  |  |  |
| Purpose of Expenditure Phones  Category/ Type                                                                                                                                                                                                                                                                                                               | Office Sought: House State: PA Senate District: 08      |  |  |  |
| Name of Federal Candidate Supported or Opposed by Expenditure:  MICHAEL G. FITZPATRICK                                                                                                                                                                                                                                                                      | Check One: President Oppose                             |  |  |  |
| Calendar Year-To-Date Per Election for Office Sought 25580.11                                                                                                                                                                                                                                                                                               | Disbursement For: Primary General 2012 Other (specify)  |  |  |  |
| (a) SUBTOTAL of Itemized Independent Expenditures                                                                                                                                                                                                                                                                                                           | 2093.75                                                 |  |  |  |
| (b) SUBTOTAL of Unitemized Independent Expenditures                                                                                                                                                                                                                                                                                                         | <b>•</b>                                                |  |  |  |
| (c) TOTAL Independent Expenditures                                                                                                                                                                                                                                                                                                                          | ·                                                       |  |  |  |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. |                                                         |  |  |  |
| Becky Bond [Electronically Filed] Date Signature                                                                                                                                                                                                                                                                                                            | 10 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y               |  |  |  |
| - <del>y</del> ···· -                                                                                                                                                                                                                                                                                                                                       |                                                         |  |  |  |

| (SCH                                                                                                                                                                                                                                                                                                                                                        | EDULE E)                                             |              |                        |                   |                        | PAGE 3<br>FOR SE OF | OF 5<br>FORM 24/48     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------|--------------|------------------------|-------------------|------------------------|---------------------|------------------------|
|                                                                                                                                                                                                                                                                                                                                                             | E OF COMMITTE (In Full)                              |              |                        |                   | FEC I                  | DENTIFICATION       | ON NUMBER ▼            |
| CR                                                                                                                                                                                                                                                                                                                                                          | EDO SUPERPAC                                         |              |                        |                   | С                      | C00507517           |                        |
| Chec                                                                                                                                                                                                                                                                                                                                                        | k If 24-hour report X 48-hour report                 | New          | report X Amends repo   | rt filed on       | 10                     | 15                  | 2012                   |
| TF                                                                                                                                                                                                                                                                                                                                                          | ull Name (Last, First, Middle Initial) of Payee      |              |                        |                   |                        |                     |                        |
|                                                                                                                                                                                                                                                                                                                                                             | Iulia Leonard                                        |              |                        | Dat               | е                      | / D D /             | Y                      |
| N                                                                                                                                                                                                                                                                                                                                                           | lailing Address 1428 Alamo Avenue                    |              |                        |                   | 10                     | 10                  | 2012                   |
| $\perp$                                                                                                                                                                                                                                                                                                                                                     |                                                      |              |                        | Am                | ount                   |                     |                        |
|                                                                                                                                                                                                                                                                                                                                                             | ity                                                  | State        | Zip Code               |                   |                        |                     | 1125.00                |
|                                                                                                                                                                                                                                                                                                                                                             | olorado Springs                                      | CO           | 80907                  | Tran              | saction II             | D : SE.8864         |                        |
|                                                                                                                                                                                                                                                                                                                                                             | urpose of Expenditure<br>ayroll                      |              | Category/<br>Type      | Office So         | ught:                  | House<br>Senate     | State: PA District: 08 |
| N                                                                                                                                                                                                                                                                                                                                                           | ame of Federal Candidate Supported or Oppose         | d by Expendi | iture:                 |                   |                        | President           |                        |
|                                                                                                                                                                                                                                                                                                                                                             | MICHAEL G. FITZPATRICK                               |              |                        | Check Or          | ne:                    | Support             | Oppose                 |
|                                                                                                                                                                                                                                                                                                                                                             | Calendar Year-To-Date Per Election for Office Sought |              | 30173.86               | Disburser<br>2012 | nent For:<br>Other (sp |                     | General                |
|                                                                                                                                                                                                                                                                                                                                                             | ull Name (Last, First, Middle Initial) of Payee      |              |                        | Dat               | M _ M                  | / D D /             | Y Y Y Y Y              |
| N                                                                                                                                                                                                                                                                                                                                                           | lailing Address 1101 156h Street, NW                 |              |                        |                   | 10                     | 12                  | 2012                   |
|                                                                                                                                                                                                                                                                                                                                                             |                                                      |              |                        | Am                | ount                   |                     |                        |
| С                                                                                                                                                                                                                                                                                                                                                           | ity                                                  | State        | Zip Code               |                   |                        |                     | 6000.00                |
| ٧                                                                                                                                                                                                                                                                                                                                                           | /ashington                                           | DC           | 20005                  | Tran              | saction I              | D : SE.8865         | 0000.00                |
| P                                                                                                                                                                                                                                                                                                                                                           | urpose of Expenditure<br>hone Dialer                 |              | Category/<br>Type      | Office So         |                        | House<br>Senate     | State: PA District: 08 |
| N                                                                                                                                                                                                                                                                                                                                                           | ame of Federal Candidate Supported or Oppose         | d by Expend  | iture:                 |                   |                        | President           |                        |
|                                                                                                                                                                                                                                                                                                                                                             | MICHAEL G. FITZPATRICK                               | , .          |                        | Check Or          | ne:                    | Support             | X Oppose               |
|                                                                                                                                                                                                                                                                                                                                                             | Calendar Year-To-Date Per Election for Office Sought |              | 36173.86               | Disburser<br>2012 | ment For:<br>Other (sp |                     | General                |
| (a)                                                                                                                                                                                                                                                                                                                                                         | SUBTOTAL of Itemized Independent Expenditure         | ros          |                        |                   |                        |                     | 7125.00                |
| (α)                                                                                                                                                                                                                                                                                                                                                         | COSTOTAL OF REMIZED INDEPENDENT EXPENDICAL           |              |                        | •                 |                        |                     | 7120.00                |
| (b)                                                                                                                                                                                                                                                                                                                                                         | SUBTOTAL of Unitemized Independent Expend            | itures       |                        | •                 |                        |                     |                        |
| (c)                                                                                                                                                                                                                                                                                                                                                         | TOTAL Independent Expenditures                       |              |                        | •                 | 7                      | 7                   |                        |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. |                                                      |              |                        |                   |                        |                     |                        |
|                                                                                                                                                                                                                                                                                                                                                             | Becky Bond                                           | [Elec        | tronically Filed] Date | M = M<br>10       | / 16                   | 201                 | Y                      |
|                                                                                                                                                                                                                                                                                                                                                             | Signature                                            |              | Date                   | 10                | 10                     | 201                 |                        |
|                                                                                                                                                                                                                                                                                                                                                             |                                                      |              |                        |                   |                        |                     |                        |

| (SCHEDULE E)                                                                                                                                                                                                                                                                                                                                                | PAGE 4 OF 5<br>FOR SE OF FORM 24/48                     |  |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|--|--|
| NAME OF COMMITTE (In Full)                                                                                                                                                                                                                                                                                                                                  | FEC IDENTIFICATION NUMBER ▼                             |  |  |
| CREDO SUPERPAC                                                                                                                                                                                                                                                                                                                                              | C C00507517                                             |  |  |
| Check If 24-hour report X 48-hour report New report X Amends report                                                                                                                                                                                                                                                                                         | rt filed on 10 15 2012                                  |  |  |
| Full Name (Last, First, Middle Initial) of Payee Anthony Smith                                                                                                                                                                                                                                                                                              | Date                                                    |  |  |
| Mailing Address 9113 Stratus Cir.                                                                                                                                                                                                                                                                                                                           | 10 10 / 2012                                            |  |  |
|                                                                                                                                                                                                                                                                                                                                                             | Amount                                                  |  |  |
| City State Zip Code  Manlius NY 13104                                                                                                                                                                                                                                                                                                                       | 937.50<br>Transaction ID : SE.8862                      |  |  |
| Purpose of Expenditure Payroll  Category/ Type                                                                                                                                                                                                                                                                                                              | Office Sought: House State: PA Senate District: 08      |  |  |
| Name of Federal Candidate Supported or Opposed by Expenditure:                                                                                                                                                                                                                                                                                              | President ————                                          |  |  |
| MICHAEL G. FITZPATRICK                                                                                                                                                                                                                                                                                                                                      | Check One: Support Oppose                               |  |  |
| Calendar Year-To-Date Per Election for Office Sought                                                                                                                                                                                                                                                                                                        | Disbursement For: Primary General  2012 Other (specify) |  |  |
| Full Name (Last, First, Middle Initial) of Payee Staples                                                                                                                                                                                                                                                                                                    | Date 10 15 2012                                         |  |  |
| Mailing Address 500 Staples Drive                                                                                                                                                                                                                                                                                                                           | 10 15 2012                                              |  |  |
|                                                                                                                                                                                                                                                                                                                                                             | Amount                                                  |  |  |
| CityStateZip CodeFraminghamMA01702                                                                                                                                                                                                                                                                                                                          | 49.91 Transaction ID : SE.9002                          |  |  |
| Purpose of Expenditure Printing Category/ Type                                                                                                                                                                                                                                                                                                              | Office Sought: House State: PA Senate District: 08      |  |  |
| Name of Federal Candidate Supported or Opposed by Expenditure:  MICHAEL G. FITZPATRICK                                                                                                                                                                                                                                                                      | Check One: Support Oppose                               |  |  |
| Calendar Year-To-Date Per Flection                                                                                                                                                                                                                                                                                                                          | Disbursement For: Primary General                       |  |  |
| for Office Sought 36767.99                                                                                                                                                                                                                                                                                                                                  | Other (specify)                                         |  |  |
| (a) SUBTOTAL of Itemized Independent Expenditures                                                                                                                                                                                                                                                                                                           |                                                         |  |  |
| (b) SUBTOTAL of Unitemized Independent Expenditures                                                                                                                                                                                                                                                                                                         | <b>&gt;</b>                                             |  |  |
| (c) TOTAL Independent Expenditures                                                                                                                                                                                                                                                                                                                          | <b>&gt;</b>                                             |  |  |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. |                                                         |  |  |
| Becky Bond [Electronically Filed] Date                                                                                                                                                                                                                                                                                                                      | 10 16 2012                                              |  |  |
| Signature                                                                                                                                                                                                                                                                                                                                                   |                                                         |  |  |

| (SCHEDULE E)                                                                                                                                                                                                                                                                                                                                                | PAGE 5 OF 5<br>FOR SE OF FORM 24/48                    |  |  |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------|--|--|--|
| NAME OF COMMITTE (In Full)                                                                                                                                                                                                                                                                                                                                  | FEC IDENTIFICATION NUMBER ▼                            |  |  |  |
| CREDO SUPERPAC                                                                                                                                                                                                                                                                                                                                              | C C00507517                                            |  |  |  |
| Check If 24-hour report  48-hour report  New report  Amends report filed on 10 15 2012                                                                                                                                                                                                                                                                      |                                                        |  |  |  |
| Full Name (Last, First, Middle Initial) of Payee                                                                                                                                                                                                                                                                                                            | _                                                      |  |  |  |
| Collin Steele                                                                                                                                                                                                                                                                                                                                               | Date    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y  |  |  |  |
| Mailing Address 417 Summit House                                                                                                                                                                                                                                                                                                                            | Amount                                                 |  |  |  |
| City State Zip Code                                                                                                                                                                                                                                                                                                                                         |                                                        |  |  |  |
| West Chester PA 19382                                                                                                                                                                                                                                                                                                                                       | 937.50<br>Transaction ID : SE.8863                     |  |  |  |
| Purpose of Expenditure Payroll  Category/ Type                                                                                                                                                                                                                                                                                                              | Office Sought: House State: PA Senate District: 08     |  |  |  |
| Name of Federal Candidate Supported or Opposed by Expenditure:                                                                                                                                                                                                                                                                                              | President ————                                         |  |  |  |
| MICHAEL G. FITZPATRICK                                                                                                                                                                                                                                                                                                                                      | Check One: Support Oppose                              |  |  |  |
| Calendar Year-To-Date Per Election for Office Sought                                                                                                                                                                                                                                                                                                        | Disbursement For: Primary General 2012 Other (specify) |  |  |  |
| Full Name (Last, First, Middle Initial) of Payee                                                                                                                                                                                                                                                                                                            | Date                                                   |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                             | M M / D D / Y Y Y Y                                    |  |  |  |
| Mailing Address                                                                                                                                                                                                                                                                                                                                             | Amount                                                 |  |  |  |
| Other Transaction                                                                                                                                                                                                                                                                                                                                           | Amount                                                 |  |  |  |
| City State Zip Code                                                                                                                                                                                                                                                                                                                                         |                                                        |  |  |  |
| Purpose of Expenditure  Category/ Type                                                                                                                                                                                                                                                                                                                      | Office Sought: House State: Senate District:           |  |  |  |
| Name of Federal Candidate Supported or Opposed by Expenditure:                                                                                                                                                                                                                                                                                              | President                                              |  |  |  |
| Training of Fourier during days of the personal by Exponential of                                                                                                                                                                                                                                                                                           | Check One: Support Oppose                              |  |  |  |
| Calendar Year-To-Date Per Election for Office Sought                                                                                                                                                                                                                                                                                                        | Disbursement For: Primary General  Other (specify)     |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                             |                                                        |  |  |  |
| (a) SUBTOTAL of Itemized Independent Expenditures                                                                                                                                                                                                                                                                                                           | 937.50                                                 |  |  |  |
| (b) SUBTOTAL of Unitemized Independent Expenditures                                                                                                                                                                                                                                                                                                         | •                                                      |  |  |  |
| (c) TOTAL Independent Expenditures                                                                                                                                                                                                                                                                                                                          | 13025.65                                               |  |  |  |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. |                                                        |  |  |  |
| Becky Bond [Electronically Filed] Date                                                                                                                                                                                                                                                                                                                      | 10 16 2012                                             |  |  |  |
| Signature East Signature                                                                                                                                                                                                                                                                                                                                    | .5 .0 2012                                             |  |  |  |